

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000105988

FILED  
Mar 09, 2012  
Secretary of State

Entity Name: MAYFIELD ROAD, INC.

**Current Principal Place of Business:**

3585 GATEWAY LANE  
NAPLES, FL 34109 US

**New Principal Place of Business:**

**Current Mailing Address:**

5215 OLD GALLOWS WAY  
NAPLES, FL 34105

**New Mailing Address:**

FEI Number: 65-0884762

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

D'AGOSTINO, LOUIS D  
821 FIFTH AVENUE, SOUTH  
SUITE 201  
NAPLES, FL 34102 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: CEO  
Name: D'AGOSTINO, FRANK  
Address: 5215 OLD GALLOWS WAY  
City-St-Zip: NAPLES, FL 34105

Title: P  
Name: D'AGOSTINO, DOMENIC D  
Address: 5215 OLD GALLOWS WAY  
City-St-Zip: NAPLES, FL 34105

Title: VP  
Name: D'AGOSTINO, JOHN  
Address: 7834 GARDNER DR #201  
City-St-Zip: NAPLES, FL 34109

Title: S  
Name: D'AGOSTINO, ANNE  
Address: 5215 OLD GALLOWS WAY  
City-St-Zip: NAPLES, FL 34105

Title: T  
Name: D'AGOSTINO, MARIO  
Address: 2215 HAWKS RIDGE DR #803  
City-St-Zip: NAPLES, FL 34105

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANNE D'AGOSTINO

S

03/09/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date